



RECEIVED

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION  
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS  
FAIR POLITICAL PRACTICES COMMISSION  
COVER PAGE

Date Received  
MAR 28 2012

Please type or print in ink.

2012 MAR 28 PM 2:40

BY: PE

NAME OF FILER (LAST) Inorell (FIRST) Jeffrey (MIDDLE) Frederick

1. Office, Agency, or Court

Agency Name

STATE ASSEMBLY

STATE ASSEMBLY MEMBER

Division, Board, Department, District, if applicable

Your Position

51

► If filing for multiple positions, list below or on an attachment.

Agency: \_\_\_\_\_ Position: \_\_\_\_\_

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County \_\_\_\_\_

☐ County of \_\_\_\_\_

☐ City of \_\_\_\_\_

☐ Other \_\_\_\_\_

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2011, through December 31, 2011.

☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

-or-

The period covered is 3/16/2011 through December 31, 2011.

☐ The period covered is January 1, 2011, through the date of leaving office.

☐ Assuming Office: Date assumed \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate: Election Year \_\_\_\_\_ Office sought, if different than Part 1: \_\_\_\_\_

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 5

☐ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I certify under penalty of perjury under the laws of the State of California that

Date Signed March 27, 2012  
(month, day, year)

Signature



**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b> <small>FAIR POLITICAL PRACTICES COMMISSION</small>
Name <u>Jeff Gorell</u>

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

California State Assembly  
ADDRESS (Business Address Acceptable) 94250-6878  
P.O. Box 942850, Sacramento CA

BUSINESS ACTIVITY, IF ANY, OF SOURCE

State Assembly  
YOUR BUSINESS POSITION  
State Assembly member

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- ☒ Salary      ☐ Spouse's or registered domestic partner's income  
☐ Loan repayment      ☐ Partnership  
☐ Sale of \_\_\_\_\_  
(Real property car, boat, etc.)  
☐ Commission or ☐ Rental income, list each source of \$10,000 or more  
\_\_\_\_\_  
☐ Other \_\_\_\_\_  
(Describe)

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Sports Unlimited Talent Agency Inc.  
ADDRESS (Business Address Acceptable) Hollywood, CA  
8265 W. Sunset Blvd. Sk. 203 90046

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Talent Agent  
YOUR BUSINESS POSITION  
model

GROSS INCOME RECEIVED

- ☒ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

- ☐ Salary      ☒ Spouse's or registered domestic partner's income  
☐ Loan repayment      ☐ Partnership  
☐ Sale of \_\_\_\_\_  
(Real property car, boat, etc.)  
☐ Commission or ☐ Rental income, list each source of \$10,000 or more  
\_\_\_\_\_  
☐ Other \_\_\_\_\_  
(Describe)

**2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000  
☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000  
☐ OVER \$100,000

INTEREST RATE

\_\_\_\_\_%      ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None      ☐ Personal residence

☐ Real Property \_\_\_\_\_  
Street address  
\_\_\_\_\_  
City

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
 (Other than Gifts and Travel Payments)

**CALIFORNIA FORM 700**

PART OF FEDERAL PRACTICES COMBUSTION

Name

Jeff Gorell

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Diego + Foldes, Inc. Cronies Sports Grill  
93003

ADDRESS (Business Address Acceptable)

2855-O Johnson Drive, Ventura, CA.

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Restaurant

YOUR BUSINESS POSITION

Manager

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000    ☒ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000    ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary    ☒ Spouse's or registered domestic partner's income

☐ Loan repayment    ☐ Partnership

☐ Sale of \_\_\_\_\_  
 (Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income. list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
 (Describe)

**1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

YOUR BUSINESS POSITION

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000    ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000    ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary    ☐ Spouse's or registered domestic partner's income

☐ Loan repayment    ☐ Partnership

☐ Sale of \_\_\_\_\_  
 (Real property, car, boat, etc.)

☐ Commission or ☐ Rental Income. list each source of \$10,000 or more

☐ Other \_\_\_\_\_  
 (Describe)

**2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000  
☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000  
☐ OVER \$100,000

INTEREST RATE

\_\_\_\_\_%    ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None    ☐ Personal residence

☐ Real Property \_\_\_\_\_

Street address

City

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_

(Describe)

Comments:

**SCHEDULE D**  
**Income – Gifts**

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION Name <u>Jeff Gorell</u>
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NAME OF SOURCE <u>California Healthcare Inst</u> ADDRESS (Business Address Acceptable) <u>888 Prospect #220 La Jolla CA 92037</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Healthcare</u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2/1/2011</u>	<u>118.11</u>	<u>Dinner/Reception</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

NAME OF SOURCE <u>Bay Biomed</u> ADDRESS (Business Address Acceptable) <u>888 Prospect #220 La Jolla CA 92037</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Healthcare</u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2/1/2011</u>	<u>118.11</u>	<u>Dinner/Reception</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

NAME OF SOURCE <u>California For Legislative Excellence</u> ADDRESS (Business Address Acceptable) <u>2150 River Plaza #150 San CA 95833</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Advocacy</u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>2/8/2011</u>	<u>\$ 75.45</u>	<u>Dinner</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

NAME OF SOURCE <u>Armedel Corp/Camelback Corp</u> ADDRESS (Business Address Acceptable) <u>2000 S McDowell, Suite 200</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Military Equipment</u> <u>Petaluma CA 94954</u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3/15/2011</u>	<u>\$ 80</u>	<u>1 tactical backpack</u>
<u>3/15/2011</u>	<u>\$ 100</u>	<u>1 tactical duffel bag</u>
<u>3/15/2011</u>	<u>\$ 80</u>	<u>1 tactical pair gloves</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

NAME OF SOURCE <u>Miller Coors LLC</u> ADDRESS (Business Address Acceptable) <u>411 East Wisconsin Milwaukee Wis 53202</u> BUSINESS ACTIVITY, IF ANY, OF SOURCE <u>Beverage</u>		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>3/1/2011</u>	<u>\$ 54.49</u>	<u>Dinner/reception</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

NAME OF SOURCE ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF SOURCE DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)		
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

Comments: Armedel and Camelback Corporations merged in 2011.